A

LETTER

TO

SIR WALTER FARQUHAR, BART.

ON THE SUBJECT OF

A PARTICULAR

Affection of the Bowels,

VERY FREQUENT AND FATAL

IN THE

EAST-INDIES.

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A

LETTER

TO

SIR WALTER FARQUHAR, Bart.

Dear Sir,

It is in conſequence of the converſations which I have had with you ſince my return to this country, and of the favourable opinion you were pleaſed to expreſs on the ſubject of the manuſcripts which I ſubmitted to your peruſal, that I have been encouraged to reviſe thoſe papers, and, for the preſent, to extract from them ſome account of that Diſeaſe, which appeared to you, as it has done to myſelf and others, ſo ſingular and extraordinary. The facts relating to it I cannot but conſider as of ſome importance; and it is from a conviction of their utility, that

I have preſumed to offer them to the public. In doing this, I am deſirous, as you ſee, of drawing ſome advantage from the intereſt which you have taken in the matter; and, by connecting a name ſo deſervedly known, with the ſubject of the following obſervations, I am willing to enſure to them whatever little attention it may be in my power to obtain. This mode of communication, which a natural diffidence and ſolicitude have, on the preſent occaſion, induced me to adopt, reſpect and gratitude to you might otherwiſe incite; and if what is here offered to the world, had a better claim to notice, in prefixing your name to a tribute more worthy of your acceptance, I ſhould be happy in a public opportunity of acknowledging the many obligations which I owe to your friendſhip.

I do not know that what I have to ſay on the ſubject of this letter will appear ſo important and new to others, as it does to myſelf; but, indeed, Sir, I am greatly deceived, and I am unconſcious of being ſo, when I intrude upon you, and through you upon the public, if the ſingular diſeaſe which I am about to deſcribe to you, has ever found a place in any of our medical records. If there really is any account of it to be met with in any writer, I have hitherto unfortunately ſought for it in vain.

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The diſeaſe of which I ſpeak, and which is by much the moſt acute and fatal I have met with in India, is an Inflammation of the Colon, attended, from the beginning, with a ſevere fixed pain above the pubes; with extreme difficulty of making water, and frequently an entire ſuppreſſion of urine. There is, at the ſame time, a violent and almoſt unceaſing evacuation from the bowels of a matter peculiar to the diſeaſe, and which I cannot deſcribe more correctly, than by obſerving that it exactly reſembles water in which raw fleſh had been waſhed or macerated. There is always a very high fever, with unquenchable thirſt and perpetual watchfulneſs. The pulſe is extremely hard, frequent, and ſtrong, reſembling that which takes place in the higheſt degree of Pleuriſy or the moſt acute Rheumatiſm; and there is a burning heat in the ſkin, which leaves a ſenſation on the finger, as if it had touched a piece of heated metal.

The fixed pain above the pubes, together with the peculiar evacuation above deſcribed, and the ſuppreſſion of urine, may be regarded as the diagnoſtics of this diſeaſe, which will, on every occaſion, ſufficiently diſtinguiſh it from all other diſorders of the inteſtines. Theſe three leading ſymptoms are ſo conſtant and invariable, that,

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having always found them exiſting together when I was firſt called to ſee the patient, I had often great difficulty in aſcertaining the exact order in which they aroſe; for the firſt approaches of diſeaſe are either diſregarded or not accurately marked by the perſons affected. Some of the patients told me that the fixed pain and purging began at the ſame time; others, that the pain preceded; and others, that they had been ſuddenly ſeized with a purging, which, after a few hours' continuance, was followed by the fixed pain and ſtrangury. This laſt, though a conſtant, is, no doubt, a ſecondary ſymptom, depending on the previous affection of the colon. But with reſpect to the fixed pain and evacuation, they appeared, in all ſevere caſes, to have begun ſo nearly at the ſame time, that I could not determine with preciſion, which followed or which preceded the other.

There is frequently a ſevere Teneſmus. But as this is not a conſtant attendant of the diſeaſe, and as it chiefly occurs in the advanced ſtages of it, I have, for that reaſon, not ſpoken of it as a leading ſymptom. One of the moſt remarkable circumſtances attending the Inflammation of the Colon is, that there is never any griping, ſuch as takes place in Dyſentery, but only a fixed and pungent pain confined to one ſpot, either immediately above

above the pubes, or a little towards the right or left ilium. The ſtrangury, or ſuppreſſion of urine, which takes place at the ſame time, is invariably found to increaſe in proportion to the ſeverity of the evacuations, whether there happens to be Teneſmus or not. Theſe evacuations, it is to be obſerved, are not only peculiar and diſtinct in their appearance from what occurs in Dyſentery and other fluxes, but they are ejected with extreme violence, as if by an extraordinary and unremitting effort of the bowels.

All the ſymptoms attending this Inflammation are in the laſt degree acute, and occaſion a ſtate of unremitting pain and watchfulneſs, in the midſt of which the patient ſeems to ſuffer ſtill more from ſadneſs and deſpondency, to which he generally gives way from the beginning. He weeps inceſſantly, and rolls about in his bed with an anguiſh and diſtraction of countenance, which it is difficult to deſcribe. Yet there is very rarely any delirium till near the approach of death; when the patient ſometimes ſinks into a ſhort ſlumber, with his eyelids half ſhut, from which he ſuddenly ſtarts, with violent and frantic ſcreams. But he becomes immediately ſenſible, on being ſpoken to by thoſe about him. This happens in ſevere caſes, and in all ſituations where opium has been

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injudiciouſly adminiſtered. In caſes where the patient has been largely bled at the beginning, there is little or no delirium, and more tranquillity and compoſure towards death.

In the advanced courſe of the diſeaſe, the neck, breaſt, and arms are generally covered with a pimply efflorescence; and, as the patient ſinks, the burning heat of the ſkin is ſucceeded firſt by large drops of ſweat on the forehead, and ſhortly after by profuſe perſpirations and clammy ſweats on the extremities, which become as cold as marble, while the parts about the præcordia are ſtill dry and burning. A very ſmall fluttering pulſe is ſtill felt at the wriſt, after the vital warmth of thoſe parts is entirely gone. It is now that the reſpiration is obſerved to become extremely laborious, and interrupted with deep and frequent ſighs. The tongue, which in the height of the fever was white and furred, now becomes perfectly black. In this ſtage of the diſeaſe there is ſometimes obſerved a remarkable dilatation of the pupil of the eye, and the patient, who is ſtill ſenſible, ſometimes mentions that all the objects around him appear much larger than natural.

Of a diſeaſe thus violent in all its ſymptoms, it may eaſily be ſuppoſed that the duration cannot poſſibly

poſſibly be long. Its courſe is found to be more or leſs extended, according to the circumſtances in which it ariſes. It is moſt frequent during ſervice in the field, and it is felt here with additional ſeverity. In the diſtraction and inconvenience of a camp, the quiet and accommodation which ſickneſs requires cannot be obtained, and the patient is unavoidably expoſed to many things which aggravate his illneſs. Here I have found the diſorder terminate fatally on the fourth, fifth, and ſixth day from its commencement. In ſituations more favourable to the quiet and comfort of the patient, it almoſt always terminates between the tenth and fourteenth day; and in no inſtance where it ended fatally, do I remember to have ſeen it protracted beyond the twenty-firſt day from its commencement. In ſome few inſtances the acceſs of Gangrene ſhortens its ordinary period.

It has nothing in it of a contagious nature, though in certain ſituations it becomes epidemic. It is chiefly confined to peculiar habits, and young men of a blooming and florid appearance are eſpecially ſubject to it on their firſt arrival in India. Thoſe who have been ſeaſoned to the climate are much leſs ſo, and it very rarely affects the aged, the infirm, and valetudinary.

It is thus, from the particular circumſtances in which it ariſes, that this diſeaſe, which is always violent in its nature, is rendered ſtill more afflicting and fatal. Its invariable courſe in attacking thoſe in the flower of youth, and on their firſt arrival in India, is of itſelf a very lamentable and aggravating circumſtance: as unſeaſoned young men are the leaſt able to contend with ſickneſs in a hot climate, and as they feel moſt ſenſibly the irkſomeneſs of a new ſituation, they are the moſt apt to give way to that dejection of mind and deſpondency which invariably attend this diſeaſe, and which have no inconſiderable influence on the event of it. Let it be remembered too, that depreſſion of mind is felt in an extreme degree from the effects of intenſe and unremitting heat, and that none experience this ſo much as young men who have been ſuddenly reduced from a ſtate of perfect health and vigour. They generally abandon themſelves to ſorrow and deſpondency, and loſe all hopes of recovery from the beginning.

I ſhall next deſcribe the appearances as they preſented themſelves upon opening the bodies of thoſe who died of this diſeaſe. Immediately under the ſpot where the fixed pain had been felt, a portion of the colon was always found to have been affected with ſevere inflammation and

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its conſequences. It was very much thickened, eroded and ulcerated; and theſe appearances, which were always moſt remarkable in one particular part, were in a leſs degree extended through the whole tract of this inteſtine, as well as of the rectum, eſpecially where there had been much Teneſmus. In thoſe caſes where an emphyſematous ſwelling took place before death, the colon was found either wholly or partially mortified. But this did not often occur, although in every caſe which I had an opportunity of inſpecting, the effects of inflammation were fartheſt advanced in the part or parts where the fixed pain had been felt. For, it is to be obſerved, that though in moſt inſtances the patients only complained of a pain in one particular ſpot, yet, in ſome others, and generally in conſequence of bliſtering, the pain ſhifted from its original ſeat to ſome other portion of the colon, which, in this way, became ſucceſſively affected; and theſe portions were always in a more diſeaſed ſtate than the intermediate parts. In moſt caſes, the effects of inflammation were confined to the colon and part of the rectum. In a few inſtances they were extended to the ſmall inteſtines, meſentery and peritonæum, though in a much leſs conſiderable degree, and I have never found theſe parts, like the colon, thickened, eroded, or ulcerated, or in

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a ſtate approaching to gangrene. They were only affected with a preternatural redneſs and fulneſs of the veſſels, and there were ſome morbid adheſions. It was otherwiſe with reſpect to the omentum; for, in all thoſe caſes, where beſides the fixed pain, there had been felt a ſenſe of ſoreneſs and tenderneſs over the whole abdominal region, and where retching and vomiting had occurred, the omentum was found in a more diſeaſed ſtate than even the colon, and it was, in ſome inſtances, quite diſſolved into a putrid maſs.

I have alſo found, though not often, the liver affected, and with portions of white matter of the ſize of a bean diſperſed through its whole ſubſtance. The gall bladder had nothing morbid or particular, and I have met with no traces of inflammation in the urinary bladder, notwithſtanding the ſevere ſymptom with which this organ is affected through the whole courſe of the diſeaſe. I think I have obſerved, (though I do not preſume to give this as an abſolute fact, but only mention it as a circumſtance requiring further illuſtration), that, in thoſe caſes where the ſuppreſſion of urine had been moſt ſevere, the lower part of the colon was chiefly affected; and where the above ſymptom had been leſs conſiderable, the ſeat of inflammation was principally confined

confined to the ſuperior arch of the colon. The ſtomach, I have never found in the ſmalleſt degree diſeaſed, nor the ſpleen, though others have ſometimes found this laſt organ affected.

As the affection of the omentum is ſo remarkable a circumſtance, and as it is in ſome inſtances diſtinctly marked from the beginning of the diſeaſe, I ſhall relate one caſe of this more at length.

James Price, a young man of 24 years of age, was ſuddenly attacked with a fixed pain at the bottom of his belly, attended with ſevere and frequent evacuations and ſuppreſſion of urine, but without any Teneſmus. He had a very high fever, and a burning heat in his ſkin, with continual thirſt and watchfulneſs. The pain at the bottom of his belly was felt on both ſides towards the ilia. Though he chiefly complained of this, he conſtantly told me, that there was a foreneſs over the whole belly, and an uneaſineſs under his ſtomach and ſhort ribs, which he did not know, as he ſaid, how to deſcribe, but complained of it as very intolerable. In the advanced courſe of his illneſs, he had conſtant retching and vomiting. He died on the 10th day from the commencement of the diſeaſe.

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On opening his body, after having made an inciſion through the peritonæum, I found a great quantity of a perfectly white matter occupying nearly the whole cavity of the abdomen. There were ſeveral white incruſtations formed on different parts of the ſurface of the inteſtines, and ſeveral morbid adheſions. Towards both ilia, the colon was very much thickened and eroded, and though the other parts were leſs affected, the whole gut was in a diſeaſed ſtate, and its interior coats were either ulcerated, or had been abraded. The ſmall inteſtines were in different places affected with a preternatural redneſs and turgeſcence of the veſſels; but here there was no thickening of the parts, nor any eroſion, and the interior coats were perfectly ſound, as I have found them in every other inſtance. The liver, rectum, ſtomach and urinary bladder, were all perfectly free from every morbid appearance. But the omentum was diſeaſed through its whole ſubſtance; and in thoſe parts neareſt the liver and ſtomach, it was diſſolved into a black and mortified maſs. This ſtate of the omentum accounts for the pain and uneaſineſs under the ſhort ribs, which at one period might have been miſtaken for an Hepatitis. It alſo accounts for the conſtant retching and vomiting.

It will readilly be obſerved, that ſeveral of the appearances which I have deſcribed, reſemble thoſe that ariſe from Dyſentery; and yet, in my opinion, no two diſeaſes can be more diſtinct in their nature and circumſtances, than what is here deſcribed, and the Dyſentery of authors. The moſt conſtant and invariable attendant of the latter diſeaſe, is ſevere griping. But here, there is never any griping whatever, and only a fixed and pungent pain, which is as diſtinct from the Dyſenteric Tormina, as the pain in Pleuriſy or Hepatitis. The ſuppreſſion of urine, which is a pathognomonic in the diſeaſe here ſpoken of, has never, ſo far as I know, been conſidered as a ſymptom in Dyſentery. In the latter too, Teneſmus is a more conſtant attendant, and the ſmall inteſtines are always found more affected than in the former. The true Dyſentery generally begins with ſickneſs at the ſtomach. But here there is no ſickneſs at ſtomach in the beginning, though this ſymptom ſometimes occurs in the advanced courſe and latter end of the diſorder, and, agreeably to what I have ſeen, in thoſe caſes only where the omentum is affected. In the inflammation of the colon, the alvine fæces are never retained or diſcharged in the form of ſcybala, as occurs in Dyſentery; beſides, that the evacuations are altogether diſtinct and peculiar, and ſuch as I have never

never ſeen in any other bowel complaint. Dyſentery is ſometimes contagious; but the diſorder here ſpoken of, though frequently epidemic, is never contagious. The former too is of uncertain duration, and, as far as my obſervation goes, is more frequently of a chronic than an acute nature. The latter is in the higheſt degree acute, and diſtinguiſhed as well by the peculiarity as by the extreme violence of its ſymptoms; by the rapidity of its progreſs, and by a fixed courſe which is leſs ſubject to variation than that of almoſt any other diſeaſe which I am able to name. In no other bowel complaint have I ever obſerved a train of ſymptoms ſo conſtant and invariable. One or two caſes, indeed, I have met with, where the ſtrangury or ſuppreſſion of urine was wanting. But from all that I have ſeen, I believe examples of this are as rare as that of an acute inflammation taking place in the liver, without producing a pain in the right ſhoulder.

It has been found, that thoſe are moſt ſubject to Dyſentery whoſe habits are already affected with a ſcorbutic taint. But it is quite otherwiſe with reſpect to this affection of the colon. During the ſiege of Seringapatam in February and March 1792, many of the ſoldiers were afflicted with a ſcorbutic diſorder. Theſe were men who had

had been long in India, and whoſe conſtitutions had been much impaired. Several of them had dyſenteric fluxes, but none of them were affected with this particular inflammation of the colon, though it made great havoc among others. It was chiefly confined to the recruits of the ſeaſon, and to thoſe eſpecially among them of the moſt blooming and florid appearance. Its victims were the fineſt young men in the army, and generally between the age of eighteen and twenty-five.

Having endeavoured to point out how eſſentially this diſeaſe differs from Dyſentery, it ſeems hardly neceſſary to mention how widely alſo it differs from Entiritis, with which it is leſs likely to be confounded; as the Entiritis is an affection of the ſmall inteſtines, and is always attended with a bound-belly, and with a pulſe of a diſtinct and peculiar kind.

It may be proper here to advert to a diſtinction of ſome importance. In the diſeaſe which has been deſcribed, I have conſidered the affection of the colon as the leading and primary cauſe of all the other ſymptoms, which diſcovers itſelf from the firſt by a fixed and pungent pain above the pubes, accompanied with a ſtrong inflammatory fever. But beſides this primary affection,

tion, in which the fever and all other ſymptoms run very high, there is in many of the fluxes of India, a ſecondary and ſymptomatic inflammation of the colon which did not exiſt at the beginning of the complaint, but comes on in the advanced ſtages of it, and is occaſioned either by improper treatment, or by the violence and obſtinacy of the diſorder itſelf. Of this diſtinction I ſhall have occaſion to ſpeak more fully afterwards, and to ſtate the importance of attending to it in the treatment of all bowel complaints in India. In the mean time, I may obſerve, that when the diſeaſe appears in this ſecondary form, that is, when it comes on in the courſe of a flux, although the ſymptoms are nearly the ſame as have been deſcribed, they are leſs acute and dangerous than when the colon is affected in the firſt inſtance.

I ſhall now proceed to mention that method of treatment which experience has pointed out to me as the moſt uſeful in this diſeaſe.

In the firſt place, I muſt obſerve, that all ſtrong purgatives do irreparable miſchief, and that they are generally hurtful in proportion to the ſeverity of the ſymptoms. In caſes where theſe run very high, I am doubtful whether even the

the mildeſt laxatives can be given with ſafety. Let it be remembered, that the ſpontaneous evacuations are here very ſevere, and that the alvine fæces are never retained, as in Dyſentery; that the bowels are conſtantly ſtimulated into the moſt extraordinary efforts. That, in fine, ſome portion of the colon is in a ſtate of very high inflammation, or already ulcerated, and that this affection appears evidently to become deeper and more extenſive from all further irritation. Under circumſtances like theſe, what good can we expect from purgatives? There is nothing in fact to diſcharge beſides what is continually thrown out by the preternatural efforts of the bowels, which are ſo ſevere and unremitting, that it becomes the principal object of cure to mitigate and reſtrain them. It is in this way only, agreeably to what I have ſeen, that we can prevent the increaſe of that morbid affection of the colon, which, even in ſituations where it was inconſiderable at the beginning, will, from further irritation, become incurable.

In what I have ſaid of the hurtful effects of purgatives, I do not advance any theoretical opinion. When I firſt met with this diſeaſe, I was altogether ignorant of its nature; and being uncertain of my way, and having no lights to guide me, I began by treating it as a Dyſen-

tery with purgative medicines; and I was only induced to abandon this mode of treatment, from the fulleſt conviction of its prejudice and inutility. I obſerved that purgatives, eſpecially where they acted with any degree of violence, always increaſed the pain at the bottom of the belly, and that, without mitigating any other ſymptom, they prematurely ſunk the ſtrength of the patient, and thus leſſened the chance of his recovery. In ſome caſes too, I found that they brought on a Teneſmus, when this did not exiſt before, and, in ſhort, the more I ſaw of this diſeaſe, the more averſe I became to the uſe of purgatives.

The mode of treatment which I found to anſwer beſt, eſpecially in the height and violence of the diſorder, was extremely ſimple, and conſiſted merely in the frequent repetition of emollient and anodyne glyſters, together with conſtant warm fomentations of the belly, and the uſe of mild and diluent drinks. In this way the pain and ſtrangury were ſomewhat abated; the evacuations moderated; the Teneſmus relieved or prevented, and the condition of the patient rendered ſomewhat more tolerable; which was the utmoſt I was able to accompliſh where the ſymptoms were very ſevere and urgent. The fixed pain was generally relieved by the application of a bliſter, but it almoſt always ſhifted to ſome other portion of the colon;

colon; and as bliſtering interfered with the more permanent relief afforded by fomentations, I was, on this account, obliged to diſcontinue its uſe.

Blood-letting is of eſſential ſervice in moderating the fever and inflammation, eſpecially when it is practiſed early. But although I have carried this to as great an extent as I could with ſafety, I have never found that blood-letting by itſelf will cure the diſeaſe, and I conſider it as chiefly uſeful, as it prepares the way for opium, which, in every ſituation where it can be given, is the beſt remedy.

It has been well obſerved by Boerhaave, that "he knew no remedy for any diſeaſe, but what "only became ſo by its ſeaſonable uſe." The truth of this valuable remark, (which is ſo unfavourable to the pretenſions of thoſe who practiſe on the weakneſs and credulity of mankind), will not be conteſted by any perſon who has had experience in the treatment of diſeaſes. It is no where more true and applicable than it is with reſpect to the uſe of opium in the diſeaſe here ſpoken of. In the height of the fever, and while the ſkin is hot and dry, opium always does harm. Inſtead of compoſing the patient, it ſtill further agitates and diſquiets him; and if in this ſituation

it is injudiciouſly perſiſted in, it gives riſe to a fixed delirium which cannot afterwards be removed. It is only in the very beginning, when the patient firſt complains of the fixed pain and ſtoppage in his water, or in caſes where the fever is leſs conſiderable, or after the urgent ſymptoms have ſubſided, that opium can be given with any proſpect of ſucceſs; and it is in theſe ſituations only that I have ſeen it of the moſt eſſential ſervice. Even in the laſt ſtage of a violent diſeaſe, although here there was every reaſon to ſuppoſe that the colon was ſo deeply affected as hardly to admit of any remedy, I have ſometimes ſeen the uſe of opium attended with the happieſt event. I ſhall here relate one of the firſt caſes of this which I met with.

John Strobond, a ſoldier, and native of Germany, a ſtout young man, of a dark complexion, was attacked with an acute and pungent pain above the pubes, attended with a ſuppreſſion of urine, a ſtrong and burning fever, and an evacuation of a matter reſembling the waſhings of fleſh. He had alſo a ſevere Teneſmus. His extremities at laſt became cold, and were covered with clammy ſweats. His reſpiration grew laborious, and he rolled about inceſſantly in his bed, much agitated, but without any delirium.

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In this ſituation I had recourſe to opium as a palliative, and not expecting that this or any thing elſe could effect a cure. Finding that it agreed well with him, I gave him a grain every hour, till he had taken ſeven grains. It did not in the leaſt affect his head, and I continued to repeat the medicine at intervals. It entirely ſtopped the diſcharge from his bowels for ſome days, and his firſt evacuations afterwards were mixed with a white matter, and of a thicker conſiſtence. During the uſe of the opium the clammy ſweats diſappeared, and the natural warmth returned to his extremities. He got perfectly well, though his bowels continued for a long time very weak and ſubject to irregularity. It was in this way that opium produced its favourable effects, when it did any good. Yet it has too often diſappointed my hopes; and ſuch is, unhappily, the fatal nature of this diſeaſe, that of thoſe whom at different times I have ſeen affected with it, by much the greater number have ſunk under its ſeverity. A few extraordinary recoveries indeed I have met with, even from the moſt deſperate ſituations. But theſe recoveries were altogether unexpected by me; and although to myſelf they appeared to be chiefly, if not wholly, owing to the uſe of opium, yet as opium did not ſucceed equally well in other caſes which were apparently ſimilar, I know

know not that I can wholly aſcribe to the aid of this medicine what may be more juſtly due to the reſources of nature. Much, no doubt, is here owing to the powers of particular conſtitutions; yet experience will not warrant me in ſaying, that theſe conſtitutions could have ſtruggled through the diſeaſe without the aſſiſtance of opium. For although many died where opium was given, I have never ſeen any one recover without it.

On the firſt approach of the ſymptoms, if we could take the diſeaſe in this ſituation, I believe that it might be checked with ſeaſonable opiates; and I have ſeen ſome caſes, the reſult of which confirms me in this opinion. But it unfortunately happens, that patients ſeldom apply for aſſiſtance till they are very bad. During the violence of the ſymptoms very little can be done; and when theſe ſubſide, the colon is in general ſo completely diſeaſed, as to be paſt all remedy. From all that I have ſeen, this extenſive and irrecoverable affection of the colon, is principally occaſioned by the ſeverity of the purging, and by the preternatural action of the bowels which attends it. To prevent, and to moderate theſe, as far as circumſtances will admit, is, in my judgment, the great object to be aimed at, and is, indeed,

deed, indiſpenſable towards effecting a cure. The advantages of this mode of treatment in all ſituations where it is practicable, will further appear from a conſideration of what follows.

I have already taken occaſion to obſerve, that during the courſe of ſeveral fluxes in India, the colon is ſubject to an inflammation, which, the better to diſtinguiſh it from the diſeaſe which has been deſcribed, I have called a ſecondary or ſymptomatic inflammation, becauſe it evidently ſupervenes upon another diſorder. In this caſe, although the ſymptoms are leſs acute than where the patient's illneſs originally began with a fixed pain at the bottom of the belly, yet if this ſymptomatic inflammation is either neglected or improperly treated, it will in the end prove as certainly mortal, as when the colon is affected in the firſt inſtance.

The following is the ordinary courſe of things where this ſymptomatic inflammation comes on.

A perſon is at firſt affected with a ſlight looſeneſs or diarrhæa, which for ſome days perhaps he pays no regard to, as it gives him little pain or uneaſineſs. As the purging increaſes, or ſimply continues, griping pains are felt; and now the evacuations,

evacuations, which before differed but little from the natural diſcharges of the bowels, are found to conſiſt more of mucus, and are generally ſtreaked with blood where they are preceded by much griping. Some degree of Teneſmus is now felt, but ſtill there is little or no fever. If in this ſituation the patient happens to be expoſed to cold or damp: if he lives irregular, or is treated with draſtic purgatives: if, in ſhort, from any cauſe whatever, his bowels are further irritated and ſtimulated into more violent action; his evacuations, in proportion to their frequency, become thinner and more bloody, and a tenſion is now felt at the bottom of the belly. This is followed by a fixed pain in ſome particular ſpot in the tract of the colon. The griping ceaſes entirely, but the fixed pain is always attended with more or leſs difficulty in making water. There is now continual thirſt and watchfulneſs, with a hot and dry ſkin, although the fever, in theſe circumſtances, never runs ſo high as where the colon is affected in the beginning. But the ſituation of the patient is very critical, and if he is not immediately compoſed with anodynes; if the ſpeedieſt means are not uſed to mitigate the pain and the ſeverity of the evacuations, his life is in the utmoſt danger.

In this ſtate of things, after I became better acquainted with the ordinary courſe and nature of the diſeaſe, I employed no purgatives, having ſeen them do harm in every caſe, where, inſtead of griping, there was fixed pain at the bottom of the belly: and this was the criterion which guided me. For wherever the colon appeared to be affected, that is, wherever the griping ceaſed, and the fixed pain aroſe, with its concomitants, I was careful to abſtain from all further irritation. My firſt object was to quiet the patient with anodynes; which, if they agreed with him, I repeated at intervals, till they produced the deſired effect. If, in this way, I ſucceeded in compoſing the bowels and checking the evacuations for ſome days, without materially increaſing the fever or affecting the head, the patient did well. His bowels were relieved with mild injections, and the evacuations were now found to be of a thicker conſiſtence, and intermixed with a white matter. In ſome inſtances where opium diſagreed, or could not be given in ſufficient quantity without affecting the head, I have found, from conſtant warm fomentations to the belly, from the frequent uſe of emollient and anodyne glyſters, and from mild and diluent drinks with only an occaſional opiate, that the diſeaſe, inſtead of getting worſe, gradually put on a chronic form, and the patient recovered.

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In this way the affection of the colon may be relieved, when it comes on in the courſe of an ordinary bowel complaint, as frequently happens. And in every caſe where it appears, that is, in every caſe where the griping ceaſes, and is followed by a fixed pain above the pubes, we ought to be fully aware of the danger of giving any further irritation to the bowels, for all the ſymptoms will become more and more acute, in proportion as the inteſtines are irritated by purging medicines. Theſe, when they operate with violence, will ſometimes bring on the complaint in caſes where it did not exiſt before. Once, in the caſe of a ſimple cholera, where a ſtrong cathartic had been moſt injudiciouſly given, I ſaw the colon in conſequence affected with an inflammation, which, in the courſe of a few days, deſtroyed the patient.

There is, perhaps, no diſeaſe where more conſtant watchfulneſs and ſolicitude are neceſſary to guard againſt any ſudden increaſe of the ſymptoms, which, when they riſe to an unuſual degree of ſeverity, are hardly to be mitigated. During cold and wet nights I have often had occaſion to obſerve the diſeaſe, where it was before moderate or had ſuffered an abatement, to increaſe ſuddenly to a moſt alarming degree. I have left the patient

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eaſy and compoſed late at night, and have found him early next morning, reduced, from a ſudden exacerbation, to a ſtate of the moſt imminent danger, and after this ſevere attack it is found impoſſible to reſtore him to his former condition. The colon is now irrecoverably affected, and all the ſymptoms depending on it are increaſed in proportion. This is eſpecially to be remembered in all thoſe moderate caſes, while the means of cure are yet within our reach. In every ſituation where the patient is relieved by opiates, by fomentations, by emollient and anodyne glyſters, theſe cannot be ſafely diſcontinued, for even a ſhort ſpace, till he is entirely out of danger. For any return of the violent purging, by increaſing the diſeaſed ſtate of the colon, will frequently put it out of our power to afford him any effectual relief. Even after his recovery, he ought not to be diſmiſſed immediately from our care, nor be permitted to return to the exerciſe of his duty for ſome time, during which every attention muſt be paid to the ſtate of his bowels, till their tone and regularity are in ſome meaſure re-eſtabliſhed. Till this is accompliſhed, there is always great riſk of a relapſe, from any expoſure to damp or to fatigue, or from any irregularity in the firſt paſſages. Such returns of the diſeaſe, I have had occaſion to obſerve, were frequently more ſevere than the firſt

attack;

attack; and young men of a delicate conformation are very ſubject to them, if they are diſcharged too ſoon, or in any reſpect neglected in a ſtate of convaleſcence or imperfect recovery. When, at laſt, they return to their duty, care ſhould be taken to examine them from time to time with reſpect to the ſtate of their bowels; and it ought always to be remembered that the ſevereſt kind of this diſorder is that which ſupervenes on a ſtate of coſtiveneſs, to which thoſe who have been already affected with bowel complaints, or who have lately arrived in India, are particularly ſubject. Whenever the affection of the colon appears, or any tendency towards it, (and it diſcovers itſelf from the firſt by the moſt unequivocal ſymptoms), we ought always to keep in mind the extreme danger of irritating the bowels by draſtic medicines. It were better, in my opinion, to leave things entirely to their own event, than, by exaſperating the ſymptoms and prematurely ſinking the ſtrength of the patient, to diminiſh what little hopes of recovery we are ſtill fain to look to in the worſt caſes, from the powers and reſources of the conſtitution.

From all that I have ſeen of the ordinary courſe of the complaint, I cannot but earneſtly urge and recommend the ſtricteſt attention to the precautions

tions which I have now ſtated. As we unfortunately can do ſo little for the relief of the patient during the height and ſeverity of the ſymptoms, the greater care and vigilance are required at our hands to guard againſt every circumſtance which may have an influence in bringing them on or in aggravating them; or which may occaſion a relapſe from a ſtate of apparent recovery, or a freſh return of the diſeaſe after it has been entirely removed. A guarded attention to theſe precautions will, in ſome meaſure, compenſate the imperfection of art; and we ſhall, in this way, be frequently enabled to prevent the diſeaſe and obviate the riſe of its ſeverer ſymptoms, as far, at leaſt, as a knowledge of the circumſtances connected with its hiſtory, can enable us to attain ſo deſirable an object.

I am aware that ſome exception may be taken againſt the uſe of opium in a diſeaſe of that violent and inflammatory kind, which has been deſcribed. Let it, however, be remembered that, far from recommending opium indiſcriminately, I have carefully reſtricted its uſe to particular circumſtances of the diſeaſe, and have ſtated how prejudicial it is in other ſtages. Inſtead of ſpeaking of it as a general remedy to be uſed at all times, I have only deſcribed thoſe ſituations in which

which I have found it of infinite ſervice, and where, in my opinion, the patient could not poſſibly have recovered without it. Some eminent practitioners, with whom I have converſed on this ſubject, have chiefly objected to the uſe of opium on the idea that moſt bowel complaints in India are connected with obſtructions in the liver, ſpleen, and meſentery; and it is certain that this is frequently the caſe in thoſe who have been long in the country. But it muſt not be forgotten that this particular affection of the colon is chiefly met with in young men on their firſt arrival in the Eaſt-Indies, and that, in ſuch conſtitutions, little is to be apprehended from viſceral obſtructions, till after a longer reſidence in the country. In confirmation of this, I may here take notice of a fact, with which I have been frequently ſtruck, and which deſerves attention. I have never met with a liver complaint in any perſon immediately after his arrival in India, nor, in general, have I ſeen the liver affected in any ſituation where the bowels had not ſuffered from previous indiſpoſition: and notwithſtanding the Hepatitis has been conſidered as the peculiar and principal diſeaſe of the Coaſt of Coromandel, the liver is not ſo immediately affected by the climate, as the inteſtinal canal. It is in conſequence of loſs of tone, irregularity, and diſorder in the bowels,

bowels, that the functions of the liver are firſt diſturbed, and that this organ becomes ſubject to inflammation and obſtruction. To this fact I have never met with a ſingle exception among all the recruits, who, at different times, fell under my care on their firſt arrival in the Eaſt-Indies. Certain it is, however, that many bowel complaints, in thoſe who have been longer expoſed to the climate, are attended with obſtructions in the liver, ſpleen, and meſentery: and as mercury has been found ſo efficacious in theſe caſes, it has alſo been tried in the diſeaſe which is the ſubject of this letter. I have been aſſured by perſons of much experience, that they had ſometimes ſucceeded in removing it by mercurial frictions, and that this anſwered beſt in the beginning after copious blood-letting. In the caſes where I tried it, I thought it ſometimes alleviated the ſymptoms. But I have never ſeen a cure effected by its uſe, and want of ſucceſs induced me to lay it aſide.

In what I have ſaid of the hurtful effects of purgatives in this complaint, I have only communicated the reſult of my experience, which forced me to depart from that mode of practice with which I began. And although the reſult of this experience, with reſpect to the event of ſevere

caſes,

caſes, has not been very fortunate and ſatisfactory, it has confirmed me in the opinion that the patient, even in the worſt ſituations, always does beſt when the bowels are not irritated with purging medicines. Fully ſatisfied, from every obſervation, that the diſeaſed ſtate of the colon becomes worſe and worſe from the continuance of the purging; that the ſymptoms are ſenſibly aggravated from every increaſe of it; and fearful of adding to this, I will not affirm that an apprehenſion of doing harm may not, in ſome inſtances, have led me into error. Yet what is here ſtated is the reſult of the moſt deliberate judgment which I have been able to form on the ſubject: and if it ſhall be found that this diſeaſe (hitherto unknown from any written account of it) has been faithfully deſcribed, and the circumſtances in which it ariſes, correctly ſtated; if the importance of watching its early approach has been properly pointed out; and the neceſſary care for preventing its return: it will not, I hope, be thought that, though often unfortunate in my endeavours to relieve it, I have been leſs attentive than I ought to the means of cure. I ſhall, at leaſt, retain the ſatisfaction of knowing that I have done my beſt to warn young and inexperienced practitioners of the extreme danger of this inflammation, and to enable them, in all ſituations, to diſtinguiſh it from

from every other diſorder of the inteſtines. To thoſe young men who are preparing to go out to India in the medical profeſſion, a knowledge of the facts here ſtated may be of ſome importance; and to them it cannot be deemed unſeaſonable in me to offer what, in their circumſtances, I ſhould have gladly and thankfully received.

FRA. DUNCAN.

26th June,
1801.

R. Noble, Printer,
Old Bailey.